

CDC/Vessel Sanitation Program
1850 Eller Drive, Suite 101
Fort Lauderdale,
Florida 33316
USA

RE STATEMENT OF CORRECTIVE ACTION - MV MELODY – FEB 04, 2003.

February 25, 2003

Dear Sir

Please find attached the following documents:

1. The Corrective Action Statement for MV Melody relative to the USPHS inspection at Port Everglades on February 04 2003.
2. Copies (in a zipped file) of Standard Procedures relating to critical items, whether violation points were deducted or not.

Thank you again for your interest in Melody. We look forward to your first visit to our new vessel, MSC Lirica, on her first call in the USA in January 2004,

Best Regards

Mediterranean Shipping Company
E. La Scala
Manager, Cruise Technical Department.

CDC/Vessel Sanitation Program
 1850 Eller Drive, Suite 101
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 Florida 33316
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RE STATEMENT OF CORRECTIVE ACTION - MV MELODY – FEB 04, 2003.

February 25, 2003

Dear Sir

The following actions have been taken to correct each of the deficiencies noted during the inspection of MV Melody on Feb. 04, 2003 at Port Everglades:

1 Medical

Ref. 11

Deficiency

Food workers excluded from work had not been cleared in writing to return to work.

Corrective Action:

The procedure to permit all crew to return to duty ONLY on written clearance from the ship's Doctor has been included in the Vessel's Standard Procedures, in accordance with the VSP manual.

Standard Procedure 33.08.01 covering this protocol is attached.

Proposed completion date:

Completed. Procedure now in place.

2A Potable Water Backflow Protection

Ref. 08

Deficiency

Backflow devices were not provided at the shower hoses in the Handicap-accessible cabins. The Shower Hoses touched the decks,

Corrective Action:

The shower hoses have been shortened to ensure they do not touch the deck (shower base), and appropriate backflow prevention devices have been ordered for installation immediately they are received, (delivery advice is for Feb 26, 2003). The Backflow Preventers have been added to the ship's Comprehensive Backflow Prevention plan and maintenance log.

Proposed completion date:

Hoses shortened to eliminate danger. Backflow Preventers to be installed on delivery, expected in the first week of April 2003.

2B Potable Water Backflow Protection

Deficiency

The Potable Water line in the Spa (Jacuzzi) filter room was fitted with a non-continuous pressure backflow preventer device. A hose with a spray nozzle on the end was attached to this device.

Corrective Action:

The offending hose has been removed. A continuous pressure backflow preventer has been fitted to the Potable Water line.

Proposed completion date:

April 2003.

2C Potable Water Backflow Protection

Ref. 08

Deficiency

The test results for the Reduced Pressure Backflow Prevention devices did not note the pressure differentials.

Corrective Action:

The scheduled testing log has been amended to include the pressure differentials in keeping with the protocols stated in the VSP Manual.

Proposed completion date:

Immediate. Resolved.

3 Ventilation

Ref. 41

Deficiency

The condensate collection system and drain pans were not accessible for inspection.

Corrective Action:

This technical deficiency will be corrected during the vessel's dry dock in December 2003.

Proposed completion date:

Completed

4A Lido Galley Warewash areas

Ref. 33

Deficiency

The Deck tiles were chipped and damaged. The grout was recessed in many areas. Food residue was noted in the recessed areas.

Corrective Action:

The broken and cracked tiles found during the inspection have been replaced wherever possible, and detailed attention has been given to the grouting between the tiles. This entire area is washed, rinsed and sanitized after every service, and inspected by the Kitchen Steward. Inspection of the floor, tiles and grouting in this and all Warewash areas is part of the ship's HACCP cleaning plan, and verified daily by the assigned supervisor.

Proposed completion date:

Partially completed and maintained now. The entire flooring of this area will be replaced when the vessel stops operation for its annual repair in December 2003.

4B Lido Galley Warewash areas**Deficiency**

Open rivets were noted throughout the bulkheads. Bulkhead panels were loose and damaged. Gaps were noted along profile strips.

Corrective Action:

This is an ongoing deficiency for which the ship gives its best attention to overcome. Some areas in the main galley which attracted the same violation last year have been completely remedied. A full renewal of panelling and profiling throughout all food and beverage areas is the only solution, but not possible to accomplish unless the vessel is placed out of service for an extended period.

Proposed completion date:

Ongoing:

- 5 Lido Galley**
Ref. 36
Deficiency
The light bulb in Refrigeration Unit P8 was not shielded or shatter-resistant.
Corrective Action:
An appropriate shield for the light in this refrigerator has been provided. A physical check of all refrigerator and food store lighting has been added to the ship's HACCP food safety HACCP checklists.
Proposed completion date:
Temporary shielding provided. Permanent shield will be installed on delivery, estimated in April, 2003.
- 6 Lido Galley**
Ref. 16
Deficiency
Cold Cuts were tested at 44 deg F. These cold cuts had been sliced that morning but were not adequately cooled.
Corrective Action:
Severe and close attention has been given to this matter. Control of food temperatures is considered an extremely important matter on our vessels. This violation was tracked back through the HACCP plan. Temperature checks are made regularly and cold food is controlled appropriately.
The ship's HACCP plan (47.07.07) for cold food is attached.
Proposed completion date:
Immediate. Controlled.
- 7 Lido Galley**
Ref. 20
Deficiency
3 of 4 thermometers tested were out of calibration.
Corrective Action:
All thermometers issued to cooks, assistant cooks, and personnel involved with the vessel's HACCP plan have been issued with clear instructions on the calibration of thermometers. The calibration of thermometers has been added to the daily HACCP checklist as a Critical Control Point, and is verified every morning in all departments by the appointed supervisor.
The ship's daily HACCP checklist (47.01.15) and Thermometer calibration procedure (23.04.04) are attached.
Proposed completion date:
Immediate. Controlled.
- 8 Lido Galley**
Ref. 21
Deficiency
An open seam was noted between the top and bottom portions of the flat top grill.
Corrective Action:
The seam between the grill on this model is a natural opening to give access to electrical components. It has been opened with power turned off and completely cleaned. This operation is now being performed regularly, resulting in the eliminated of food debris.
Proposed completion date:
Completed.

- 9 Lido Galley**
Ref. 27
Deficiency
The seam along the grill was soiled with grease.
Corrective Action:
The offending seam has been completely cleaned and all traces of grease removed.
This cleaning protocol is now performed regularly.
Proposed completion date:
Completed.
- 10 Lido Beverage Station**
Ref. 33
Deficiency
The deck drain areas were soiled and difficult to clean.
Corrective Action:
The floor drain was cleaned immediately, and the cleaners have been supplied with flashlights in order to see deep inside the drains. This inspection point has been added to the area's daily cleaning checklist, and verified after every service.
Proposed completion date:
Completed.
- 11 Lido Dishwasher/Potwash cleaning locker**
Ref. 31
Deficiency
An unlabelled spray bottle was noted in the cleaning locker.
Corrective Action:
This was a human oversight which was corrected on the spot. The checking of all cleaning chemical containers, labels and location is part of the 'local area food safety' checklist and now successfully enforced.
The Standard Procedure covering this matter (47.03.02) is attached.
Proposed completion date:
Completed and enforced
- 12 Lido Potwash**
Ref. 26
Deficiency
A cutting board was noted to have grease residue. This board was stored as clean.
Corrective Action:
This was a surprising discovery over which immediate action was taken. Great care is taken in the cleaning and sanitizing of all food contact and non-food contact surfaces, particularly in the warewashing areas. The personnel responsible for quality control in this area have been addressed accordingly and extreme care is being exercised to avoid any repeat of this violation.
The Standard Procedure covering this matter (47.03.06) is attached.
Proposed completion date:
Completed and enforced.

13 Lido Potwash

Ref. 28

Deficiency

Grease was noted on the potwash clean storage rack.

Corrective Action:

As stated in Point 12, this was an unusual and serious oversight, particularly considering the serious attitude the vessel adopts for all food contact and non-food contact surfaces. Appropriate steps were taken immediately and an additional check has been inserted in the 'local area food safety' checklist to avoid a repetition of this item.

Proposed completion date:

Completed and enforced.

14 Lido Potwash

Ref. 20

Deficiency

Large open sections were noted in the whisk handles where the whisk heads are attached.

Corrective Action:

The whisk in question was immediately removed and discarded. All food preparation equipment has been re-inspected for damage and removed from service wherever detected.

Proposed completion date:

Completed.

15 Main Galley General

Ref. 33

Deficiency

The decks, bulkheads and deckheads in food preparation, warewashing, pantries and storage areas were in disrepair. (Cracks and crevices).

Corrective Action:

As explained in the corrective action for Point 4 (b), this is an ongoing violation for which the ship gives its best attention to overcome. A full renewal of panelling and profiling throughout all food and beverage areas is the only solution, but not possible to accomplish unless the vessel is placed out of service for an extended period.

Proposed completion date:

Ongoing.

16 Main and Crew Galley

Ref. 20

Deficiency

The interior of the older model reach-in refrigerators were difficult to clean due to exposed fan coil units, wires and piping. VSP officers noted the replacement of the old refrigerators is being phased in.

Corrective Action:

MSC is continuing to replace all older refrigerators where this problem exists. Several have already been replaced, and as this CAS is being prepared, the offending refrigerator which led to this deficiency is being replaced with a new unit. The refurbishment program will continue as scheduled until all deficient units are replaced.

Proposed completion date:

Ongoing.

17 Main Galley Warewash

Ref. 22

Deficiency

The wash and rinse temperature measuring devices were not giving accurate readings,

Corrective Action:

Replacement fixed thermometers on the offending machines have been ordered, and will be replaced immediately the new thermometers are received. In the meantime, the vessel's Standard Procedure requires manual readings frequently for each cycle to control temperatures accurately. During this test, the surface temperature of washed dishes was 165 deg F. Correction of the existing thermometers depends on delivery of the thermometers.

Proposed completion date:

April 2003 – or as soon as thermometers are received.

18 Bakery

Ref. 19

Deficiency

Three loafs of bread wrapped in plastic stored in the refrigerator were covered with heavy condensation.

Corrective Action:

This refrigerator is the one currently being replaced by the new unit seen and verified by USPHS Inspector Wayne Hall.

Proposed completion date:

Remedy complete (refrigerator out of service). New refrigerator will be installed at the first opportunity. (Now on board).

19 Crew Galley

Ref. 37

Deficiency

Heavy condensation was found formed over a boiler in the crew galley.

Corrective Action:

Air extraction in the galleys generally has been intensified, and the problem appears to have been resolved.

Proposed completion date:

Immediate. Resolved.

20 Provisions

Ref. 15

Deficiency

Dented cans were noted in the provisions dry goods area. The cans were separated immediately.

Corrective Action:

A procedure has been adopted which requires the rejection of any damaged or swollen cans (this is already standard procedure), but to also separate from all other canned goods any containers with any damage. These cans will be closely inspected by the Food Safety Officer, to determine whether they should be discarded, or whether the damage is so minor that the contents are safe.

The Standard Procedure covering this matter (47.01.09) is attached.

Proposed completion date:

Immediate. Resolved.

21 Integrated Pest Management

Ref. 40

Deficiency

The Material Safety Data sheets should be provided in the Pest Management Manual.

Corrective Action:

All composition data and medical advisory information has been obtained and inserted into the existing IPM manual on Melody and all other vessels of the fleet.

Proposed completion date:

Immediate. Technician now has new manual.

***Copies of associated Standard Procedures are attached in Zipped file.
End of Corrective Action Statement***